PATENT APPLICATION SERIAL NO. 10/593938

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

09/28/2006 HKAYPAGH 00000083 10593938

(01	FC:2631	•		•	150.00	OP.
		-F C+2632	•	 ·:	•	250:00	-OP
		FC:2633				100.00	OP
(04	FC:2615	٠٠.			125.00	OP
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05/21/2007 JANDERSO 00000005 10593938

01_FC:2642 200.00 OP

PTO-1556 (5/87)

02 FC:2632

-250,00 OP

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 10/593938

Effective December 8, 2004												
	·	(Column 1) (Column 1)		(Column 2)		SMALL ENTITY TYPE		OTHER TH OR SMALL ENT				
U.S	. NATIONAL	STAGE FEES]	RATE	FEE	7	RATE	FEE
BAS	IC FEE		SMALL EN	T. = \$ 150	LARGE ENT. = \$ 300		1	BASIC FEE	150	OR	BASIC FEE	
EXA	MINATION FE	E	Satisfies PCT (4) = \$5			ther situations = \$ 100 / \$ 200		EXAM. FEE	100	1	EXAM. FEE	
SEA	RCH FEE		U.S. is ISA = ALL other c \$ 200 /	ountries = "	60 / \$ 100 tries = ALL other situations =			SEARCH FEE	200		SEARCH FEE	1
FEE	FOR EXTRA	SPEC. PGS.	mi	inus 100 = /		/ 50 =		X \$ 125 =		1	X \$ 250 =	
тот	AL CHARGEA	BLE CLAIMS	25 minus 20 = *		* 5	5		X \$ 25 =	125	OR	X \$ 50 =	
INDI	EPENDENT CL	AIMS	#	# minus 3 = *				X \$ 100 =	100	OR	X \$ 200 =	<u> </u>
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT		<u> </u>		ı	+ \$ 180 =	700	OR	+ \$ 360 =	
* If	the difference	e in column 1 is	less than zer	ro, enter "C)" in co	olumn 2	L	TOTAL		OR	TOTAL	
		(Column 1) CLAIMS REMAINING	AMENDE	Colur (Colur HIGH NUMI	nn 2) EST	(Column 3)		SMALLE	NTITY ADDI-	OR	OTHER SMALL I	
AMENDMENT A	7-1	AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AM	Independent		Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
·	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					L	+ \$ 180 =		OR	+ \$ 360 =		
								FFF		OR	TOTAL ADDIT. FFF	
		(Column 1)	,	(Colum		(Column 3)						
X		CLAIMS REMAINING AFTER AMENDMENT		HIĞHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+ \$ 180 =		OR	+ \$ 360 =			
						<u>. </u>	OTAL ADDIT.	·	OR L	TOTAL ADDIT.		
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***	f the "Highest Nu f the "Highest Nu	imn 1 is less than the imber Previously Pai imber Previously Pai	d For" IN THIS S d For" IN THIS S	PACE is less	than '20)', enter "20".						
	ine inglestitui	nber Previously Paid	For (Total or Inc	dependent) is	the high	nest number found in	n the	appropriate box	in column 1.			